

CLAIMS ONLY						Application Number 10780498	Filing Date
						Applicant(s)	
* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
1							
2							
3							
4							
5							
6							
7							
8							
9	1						
10		1					
11			1				
12				1			
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49							
50							
Total Indep							
Total Depend							
Total Claims							